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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

Declaration Submitted With Initial Filing

OR

Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

pond to a collection of information	on unless it contains a valid OMB control nu	mber.
Attorney Docket Number	29105\40749	
First Named Inventor	Jolanta GUTKOWSKA	
CON	IPLETE IF KNOWN	
Application Number	ТВА	
Filing Date	June 13, 2003	
Art Unit	ТВА	
Examiner Name	ТВА	

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I hereby declare that:	I hereby declare that:						
Each inventor's residence, mailing address, and citizenship are as stated below next to their name.							
I believe the inventor(s) name which a patent is sought on t	I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:						
OXYTOCIN AS CAR	DIOMYOGE	NESIS INDUC	ER AND	USES TH	IEREOF		
		(Title of the	Invention)			· .	
the specification of which		•	,				
is attached hereto			٠		•		
OR							
was filed on (MM/DD/	YYY)	06/13/2003	as Uni	ited States App	lication Num	ber or PCT	International
							monadona.
Application Number PCT/C	A2003/000897	and was amende	d on (MM/I	DD/YYYY)	12/21/20)04 (i	if applicable).
I hereby state that I have revi amended by any amendment	ewed and unde	rstand the contents	of the abo	ve identified sp	pecification, i	including the	claims, as
	•		:				
I acknowledge the duty to continuation-in-part application	lisclose informa	tion which is mate	erial to pate	entability as de	efined in 37	CFR 1.56,	including for
and the national or PCT inter	<u>national</u> filing da	ate of the continuati	ion-in-part a	application.		·	
I hereby claim foreign priorit	y benefits unde	er 35 U.S.C. 119(a)-(d) or (f).	or 365(b) of	any foreign	application(s) for patent,
inventor's or plant breeder's country other than the United	nghts certificate States of Amer	(s), or 365(a) or ar rica_listed below ar	ny PCT INTE	mational appli in identified be	ication which	n designated	l at least one
application for patent, inventor	or's or plant bree	eder's riahts certific	ate(s), or a	ny PCT interna	ational applic	cation having	g a filing date
before that of the application Prior Foreign Application	on which priority		- Dodo	D.i 'A			
Number(s)	Country	Foreign Filing (MM/DD/YY		Priority Not Claim		ertified Copy YES	y Attached? NO
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Additional foreign at	oblication number	ers are listed on a s	supplement	al priority data	sheet PTO/S	SR/02R attack	ched bereto

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

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Name								
Address		 		***************************************				
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NAME OF SOLE OR FIRST IN				*******	-	uneiar	and inventor	
Given Name (first and middle [i	if anvl)	1 1 1 11 17	oddoll II	etition has been filed for this unsigned inventor Family Name or Surname				
Jolanta_				GUTKOWSKA				
Inventor's Signature	to war			***************************************		•	Date 07.02.200	
1.	U- U- U- S							
Residence: City	State		Count			Citizer	nship	
Ville Mont-Royal	Quebec		Canada	CAY		Canada		
Mailing Address 139 avenue Appin							:	
City	State			Zip		 -	Country	
Ville Mont-Royal	Quebec		1	-13P 1V6		1	Country Canada	
NAME OF SECOND INVENTO					e boo		or this unsigned inventor	
Given Name (first and middle [i			1 4		_			
Joanne	i aity])			Family Na	me or	Surnarr	16	
Inventor's Signature				I ridolit		T	Date	
Residence: City	Letata		Carrat					
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Montreal	Quebec		Canada			Canada	·	
Mailing Address 10151 Georges-Baril							4	
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Montreal	Quebec		Н	2C 2M9		Canada	.: : <u>:</u> :	
Additional inventors or a legal re	presentative are being name	ed on thes	upplemen	tal sheet(s) PTO/	SB/02A	or 02LR a	attached hereto.	

[Page 2 of 2]



Under the Paperwork Reduction Act of 1995.

Name of Additional Joint Inventor, if any:

Name of Additional Joint Inventor, if any:

Name of Additional Joint Inventor, if any:

Given Name (first and middle (if any))

Given Name (first and middle (if any))

Bogdan A.

Inventor's Signature Montreal

Montreal

City

Marek

Inventor's Signature

Montreal
Residence: City

Montreal

Inventor's Signature

Residence: City

Mailing Address

City

5155 West Broadway Mailing Address

Residence: City

455 St. Kevin, App. 306
Mailing Address

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DECLARATION

Given Name (first and middle (if any))

Quebec State

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ADDITIONAL INVENTOR(S)

	Supplementars		Pag	θ 3	_ of <u>3</u>
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_	A petition	has been filed for this ur	nsigned	inventor	
	Family Name or	Surname			
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	intation unless it displays a valid OMB control number.
Application Number	ТВА
Filing Date	June 13, 2003
First Named Inventor	Jolanta GUTKOWSKA
Title	OXYTOCIN AS CARDIOMYOGENESIS
Art Unit	TBA
Examiner Name	TBA
Attorney Docket Number	29105\40749

I hereby appoint:				
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Practitioners associated with the Customer Number:		04743		
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Practitioner(s) named below:				
Name			Registration	Number
as my/our attorney(s) or agent(s) to prosecute the application Trademark Office connected therewith.	identified above,	and to trans	sact all business	in the United States Patent and
Please recognize or change the correspondence address for	the above-identifi	ed application	on to:	
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l am the:				
Applicant/Inventor.				
Assignee of record of the entire interest. See 37 CF Statement under 37 CFR 3.73(b) is enclosed. (Form				
SIGNATURE of Applicant or Assignee of Record (if as	signee, put name,	title and co	ompany name in	the "Name" space below)
Name Joanne Paquin				
Signature Jaunne Jaguur				
Date 10 ferrier 2005		****	Telephone	514-381-2926
NOTE: Signatures of all the inventors or assignees of record of the enforms if more than one signature is required, see below*.	tire interest or their i	epresentative	e(s) are required. Su	ubmit multiple
*Total of 4 forms are submitted.				

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Application Number	ТВА
Filing Date	June 13, 2003
First Named inventor	Jolanta GUTKOWSKA
Title	OXYTOCIN AS CARDIOMYOGENESIS
Art Unit	TBA
Examiner Name	ТВА
Attorney Docket Number	29105\40749

I hereby appoint:					
Practitioners associated with the Customer Number:		04743	3		
OR	<u> </u>				
Practitioner(s) named below:					
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as my/our attorney(s) or agent(s) to prosecute the application Trademark Office connected therewith.	on identified above, a	and to tran	isact all busines	s in the Un	inted States Patent and
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Telephone	·	Fax			
Applicant/Inventor.					
Assignee of record of the entire interest. See 37 C	ED 2 71				
Statement under 37 CFR 3.73(b) is enclosed. (For					
SIGNATURE of Applicant or Assignee of Record (if a	issignee, put name,	title and c	company name i	n the "Nam	ne" space below)
Name Bogdan A. Danalache					
Signature					
Date 1002 2005			Telephone		
NOTE: Signatures of all the inventors or assignees of record of the forms if more than one signature is required, see below*.	entire interest or their re	epresentativ	ve(s) are required.	Submit mult	iple
*Total of 4 forms are submitted.	·				

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

Declaration Submitted With Initial Filing

OR

Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

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I hereby declare that:			•	<u>-</u>		
Each inventor's residence, ma	ailing address,	and citizenship are as	stated below ne	xt to their nam	e.	
I believe the inventor(s) name which a patent is sought on the	d below to be to	he original and first in itled:	ventor(s) of the s	subject matter	which is clair	ned and for
OXYTOCIN AS CARD			R AND USE	S THERE)F	
the enceitienties of which		(Title of the In	vention)			
the specification of which						
is attached hereto						
OR						
was filed on (MM/DD/YYYY) 06/13/2003 as United States Application Number or PCT International						
Application Number PCT/C/	2003/000897	and was amended	on (MM/DD/YYY	Y) 12/2	21/2004	(if applicable).
I hereby state that I have revieus amended by any amendment	ewed and under	rstand the contents of	f the above identi	ified specificati	on, including	the claims, as
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I acknowledge the duty to di	sclose informa	tion which is materia	al to patentability	as defined in	37 CFR 1.	56, including for
continuation-in-part application and the national or PCT intern	ns, material inf ational filing da	ormation which becai	me avaliable bet -in-part application	ween the tiling on.	date of the	prior application
I hereby claim foreign priority	benefits unde	r 35 U.S.C. 119(a)-(d) or (f), or 365	(b) of any fore	eign applicati	on(s) for patent,
inventor's or plant breeder's r country other than the United	ights certificate States of Amer	(s), or 365(a) of any	PCT international	al application v	vhich designa	ated at least one
application for patent, inventor	r's or plant bree	eder's rights certificate	e(s), or any PCT	international a	pplication ha	ving a filing date
before that of the application of	n which priority	is claimed.				
Prior Foreign Application Number(s)	Country	Foreign Filing D (MM/DD/YYY)		Priority Claimed	Certified C	opy Attached?
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Additional foreign ap	plication number	ers are listed on a sup	plemental priority	y data sheet P	TO/SB/02B a	ttached hereto.

[Page 1 of 2]

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NAME OF SOLE OR FIRST IN	VENTOR:	□ Ap	etition has	been filed fo	or this unsid	aned inventor
Given Name (first and middle [if any]) Family Name or Surname						
Jolanta GUTKOWSKA						
Inventor's Signature						Date
Residence: City	State	-	Country		Citiz	enship
Ville Mont-Royal	Quebec		Canada	_	Canad	la
Mailing Address 139 avenue Appin						
City	State		Zip			Country
Ville Mont-Royal	Quebec		НЗБ	1V6		Canada
NAME OF SECOND INVENTO	R:			petition has	s been filed	for this unsigned inventor
Given Name (first and middle [in Joanne	f any])		I	Family Nam	ne or Surna	nme
Inventor's Signature	me Paquin	,				Date 10:5
Residence: City	State		Country		Citize	enship
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Additional inventors or a legal re	presentative are being named	on thes	supplemental s	heet(s) PTO/S	B/02A or 02LF	R attached hereto.

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DECLARATION

ADDITIONAL INVENTOR(S)

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••	Page 3	of 3
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Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor						
Given Name (first and middle (if any)) Bogdan A.		Family Name or Surname DANALACHE				
Inventor's Signature				10 02 Date 2005		
Montreal Residence: City	Quebec State	Cana Cou	da Intry CAX	Romania Citizenship		
455 St. Kevin, App. 306						
Mailing Address		 	<u> </u>			
Montreal	Quebec		H3T 1J1	Canada		
City	State		Zip	Country		
Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor						
Given Name (first and middle (if any))		Family Name or Surname .				
Marek JANKOWSKI						
Inventor's Signature			Date			
Montreal	Quebec		Canada	Canada		
Residence: City	State		Country	Citizenship		
5155 West Broadway Mailing Address						
Montreal	Quebec		H4V 2A1	Canada		
City	State		Zip	Country		
Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor						
Given Name (first and middle (if any))		Family Name or Surname				
Inventor's Signature			Date			
Residence: City	State		Country	Citizenship		
Mailing Address						
City	State		Zip	Country		

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Application Number	ТВА		
Filing Date	June 13, 2003		
First Named Inventor	Jolanta GUTKOWSKA		
Title	OXYTOCIN AS CARDIOMYOGENESIS		
Art Unit	TBA		
Examiner Name	TBA		
Attorney Docket Number	29105\40749		

I hereby appoint:				
Practitioners associated with	the Customer Number:	04743		
OR				
Practitioner(s) named below:				
-	Name		Registration Number	

as my/our attorney(s) or agent(s) to Trademark Office connected therew	prosecute the application identified a ith.	bove, and to trans	sact all business in the Unite	ed States Patent and
Please recognize or change the corr	respondence address for the above-	dentified application	on to:	
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Applicant/Inventor.				
l — ¨				
	entire interest. See 37 CFR 3.71. 3.73(b) is enclosed. (Form PTO/SB/9	6)		
	ssignee of Record (if assignee, put		mpany name in the "Name	" space below)
Name Jolanta Gutkowska			··	
Signature (<	3 12 300			
Date 07	1 02 2005		Telephone 800-9	1000 10021
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple				
forms if more than one signature is requir	red, see below*.			
★Total of 4form	s are submitted.			

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Application Number	TBA			
Filing Date	June 13, 2003			
First Named Inventor	Jolanta GUTKOWSKA			
Title	OXYTOCIN AS CARDIOMYOGENESIS			
Art Unit	ТВА			
Examiner Name	ТВА			
Attorney Docket Number	29105\40749			

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✓ A	pplicant/Inventor.						
		the entire interest. See 37 CFF	R 3.71.				
		FR 3.73(b) is enclosed. (Form					
SIGNAT	TURE of Applicant of	or Assignee of Record (if ass	ignee, put nam	e, title and co	mpany name ir	the "Nam	ne" space below)
Name	Marek Jankowski					V	Jalorsk!
Signature	09	Tarboust					
Date	07.00	1000			Telephone	890.	9050-12752
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.							
L Y _ 'Tot	al of <u>4</u>	forms are submitted.					

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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